FINAL/APPROVED **VIRGINIA BOARD OF PHARMACY**
MINUTES OF BOARD MEETING

June 10, 2003
Fifth Floor
Conference Room 2

Department of Health Professions
6603 West Broad Street
Richmond, Virginia 23230

CALL TO ORDER: A meeting of the Board of Pharmacy was called to order at 9:05 a.m.

PRESIDING: Mark A. Szalwinski, Vice Chairman

MEMBERS PRESENT:
Michael J. Ayotte
Willie Brown
Michelle R. Easton
Bobby Ison
Leo H. Ross
John G. Selph
Jackson T. Ward

MEMBERS ABSENT: Carthan Currin Jr. (Sonny), Chairman

STAFF PRESENT:
Elizabeth Scott Russell, Executive Director
Cathy Reiniers-Day, Deputy Executive Director
Ralph A. Orr, Deputy Executive Director
Elaine J. Yeatts, Senior Regulatory Analyst
Howard M. Casway, Assistant Attorney General
Heather L. Womack, Administrative Assistant (business session)
Donna M. Lee, Administrative Assistant (disciplinary session)

QUORUM: With eight members of the Board present, a quorum was established.

Mark Oley arrived at 9:15 a.m.

APPROVAL OF AGENDA: Ms. Easton moved and the agenda was approved as amended to replace "addition of language addressing storage of IV solutions, contrast media, etc in hospitals to the proposed regulations adopted in April" with "substantial changes to proposed regulations" and to add legislative proposals and old business concerning the request from the American Council on Pharmaceutical Education (ACPE) for comment regarding standardizing technician training.

INTRODUCTION: Ms. Russell introduced Betty Jolly as the new Assistant Director for Policy Education.

PUBLIC COMMENTS: No public comments were received at this time.

APPROVAL OF MINUTES: Mr. Szalwinski called for changes or corrections to the minutes of April 29, 2003. The minutes were approved as presented.

REQUEST FROM MARY WASHINGTON CONCERNING OFF-SITE ORDER ENTRY: The Board discussed the request from Mary Washington Hospital concerning off-site order entry. Mr. Ison moved, and the Board voted unanimously to have staff draft a guidance document to be presented and approved at the next Board meeting in September.

SUBSTANTIAL CHANGES TO THE PROPOSED REGULATIONS ADOPTED IN APRIL: The Board reviewed the substantial changes that were made to the proposed regulations adopted in April. Mr. Ison moved, and the Board voted unanimously to adopt as proposed regulation the draft changes to 18 VAC 110-20-440 (D) to address storage of IV solutions, medical gases, and several other products in hospitals.

Mr. Ison moved, and the Board voted unanimously to adopt as proposed regulation the draft amendments to 18 VAC 110-20-490 and 18 VAC 110-20-555 related to the use of automated dispensing devices by hospitals and nursing homes.

The board discussed its previous adoption of proposed regulation 18 VAC 110-20-90 (B) which would authorize the board to designate continuing education in a particular subject area as part of the 15 hour requirement and whether this process would actually constitute rulemaking without going through the APA. The board agreed that it wanted this authority, but also agreed that it would be better to seek this authority in legislation rather than rulemaking. (attachment 1)

LEGISLATIVE PROPOSALS: The board reviewed draft legislation to grant the board authority to require up to 2 hours CE in a particular subject as part of the 15 hour annual requirement by publishing such requirement by January 1 of the calendar year in which it would be required. The legislation also provides an exemption from the APA for this requirement. Mr. Ayotte moved and the board voted unanimously to approve the draft legislative proposal as amended, and additionally to remove from proposed regulations the language the board had adopted in April for 18 VAC 110-20-90 (B) providing similar authority. (attachment 2)

The board reviewed draft legislation to update § 54.1-3434.02 to conform to changes in statute requiring registration of pharmacy technicians by the board which lists the filling of automated devices as a pharmacy technician task. The old language authorized PTCB certified technicians to fill automated dispensing devices. The new language removes reference to "PTCB certified" and inserts the term "pharmacy technician" referring to someone

registered with the board. It also removes other obsolete language related to whether the device is used to replace a unit dose system. (attachment 3)

BOARD OF HEALTH PROFESSIONS REPORT:

The Board was provided minutes of the last Board of Health Professions meeting to review.

ACPE REQUEST CONCERNING STANDARIZING OF PHARMACY TECHNICIAN TRAINING:

The Board discussed a request from ACPE concerning standards for training pharmacy technicians. Mr. Szalwinski appointed a committee of Mr. Ayotte, Ms. Easton, and Mr. Ross to draft a response to ACPE for review by the Board in September.

EXECUTIVE DIRECTOR'S REPORT:

Ms. Russell discussed with the Board the upcoming implementation of the prescription monitoring program. The program will be headed by an administrator and will have a part-time assistant. The program will cover the southwest Virginia region and only cover Schedule II prescriptions. The RFP for a contract has been issued with a planned award date of mid- July. It is anticipated that pharmacies will begin reporting to the program September 1, 20003. Information retrieved from the database is planned to be available November 1, 2003.

CONSENT ORDER:

Closed Session:

Mr. Ayotte moved, and the Board voted unanimously, to enter into closed session pursuant to Section 2.2-3711(A)(28) of the Code of Virginia for the purpose of deliberation to reach a decision regarding a Consent Order. Additionally, he moved that Scotti Russell, Cathy Reiniers-Day and Howard Casway attend the closed session because their presence is deemed necessary and will aid the Board in its deliberations.

Reconvene:

Mr. Ayotte moved, and the Board voted unanimously, that only public business matters lawfully exempted from open meeting requirements and only such public business matters as were identified in the motion for closed session were heard, discussed or considered during the closed session.

Mr. Brown moved, and the Board voted unanimously, to approve the Consent Order for John E. Harris.

FORMAL HEARING:

MOSLEM ESKANDARI
Lic. #0202-011379

A hearing was held in the matter of Moslem Eskandari to discuss his petition for reinstatement of his license that was mandatorily suspended on July 13, 2001, and allegations that he may have violated certain terms and condition of a Board Order entered

January 25, 1999.

James L. Banning, Director, Administrative Proceedings Division, presented the case. Mr. Eskandari appeared in person and was not represented by counsel.

Moslem Eskandari testified on his own behalf.

Closed Session: Mr. Ayotte moved, and the Board voted unanimously, to enter into closed session pursuant to Section 2.2-3711(A)(28) of the Code of Virginia for the purpose of deliberation to reach a decision in the matter of Moslem Eskandari. Additionally, he moved that Scotti Russell, Cathy Reiniers-Day and Howard Casway attend the closed session because their presence is deemed necessary and would aid the Board in its deliberation.

Reconvene: Mr. Ayotte moved, and the Board voted unanimously, that only public business matters lawfully exempted from open meeting requirements and only such public business matters as were identified in the motion for closed session were heard, discussed or considered during the closed session.

Mr. Ward moved, and the Board voted unanimously, to accept the Findings of Fact and Conclusions of Law as proposed by Mr. Banning.

Mr. Ward moved, and the Board voted unanimously, to deny Mr. Eskandari's petition for reinstatement of his license, and that his license be continued on indefinite suspension. The Board further Ordered that contingent upon Mr. Eskandari's compliance with certain terms and conditions he would be eligible to register as an intern with the Board; and upon compliance with his internship terms and conditions, the suspension shall be stayed subject to certain terms and conditions.

ADJOURN: With all business concluded, the meeting adjourned at 1:30 p.m.

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Heather L. Womack
Administrative Assistant

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Donna M. Lee
Administrative Assistant

Elizabeth Scott Russell
Executive Director

Mark A. Szalwinski, Vice Chairman

Date

ATTACHMENT 1

Substantial Changes to Proposed Regs:

18 VAC 110-20-90. Requirements for continuing education.

A. On and after December 31, 1993, a ~~licensee~~ pharmacist shall be required to have completed a minimum of 1.5 CEU's or 15 contact hours of continuing pharmacy education in an approved program for each annual renewal of licensure. CEU's or hours in excess of the number required for renewal may not be transferred or credited to another year.

~~B. As part of the 15-hour requirement, the board may require up to 2 hours of continuing education in a specific subject area as part of the annual requirement. If the board designates a required subject area of CE, the board shall notify each pharmacist of the requirement no later than January 1 of the calendar year for which the specific CE is required. In the event of a documented public health emergency that requires rapid training of pharmacists in a specific subject area, the board may require pharmacists to receive up to 2 hours training within 6 months of written notification to all pharmacists of the emergency requirement and of the availability of such training.~~ ***(Consider legislation to create an APA exemption.***

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18 VAC 110-20-440. Responsibilities of the pharmacist-in-charge.

A. The ~~pharmacist-in-charge~~ PIC in a pharmacy located within a hospital or the ~~pharmacist-in-charge~~ PIC of any outside pharmacy providing pharmacy services to a hospital shall be responsible for establishing procedures for and assuring maintenance of the proper storage, security, and dispensing of all drugs used throughout the hospital.

B. The ~~pharmacist-in-charge~~ PIC of a pharmacy serving a hospital shall be responsible for a ~~monthly review of drug therapy for each patient within the hospital for a length of stay of one month or greater. A record of such review shall be signed and dated by the pharmacist~~ maintaining a policy and procedure for providing reviews of drug therapy ~~and shall~~ to include at a minimum ~~but not limited to~~ any irregularities in drug therapy, drug interactions, drug administration, or transcription errors. All significant irregularities shall be brought to the attention of the attending practitioner or other person having authority to correct the potential problem.

C. Prior to the opening of a satellite pharmacy within the hospital, the ~~pharmacist-in-charge~~ PIC shall notify the board as required by 18 VAC 110-20-140 and shall ensure compliance with subsections B through G of 18 VAC 110-20-150, 18 VAC 110-20-160, ~~subdivisions 5 and 6 of~~ 18 VAC 110-20-170, 18 VAC 110-20-180 through 18 VAC 110-20-190. No drugs shall be stocked in a satellite pharmacy until an inspection has been completed and approval given for opening.

D. For the following list of Schedule VI controlled substances, the PIC of a pharmacy serving a hospital may authorize the storage in an area of the hospital outside the pharmacy, and may delegate the ordering and distribution within the hospital to non-pharmacy personnel provided the conditions for proper storage and adequate security and the procedures for distribution are set forth in the pharmacy's policy and procedure manual, and provided that the PIC assures that these storage areas are checked monthly for compliance. The storage areas must be locked when authorized staff is not present in the area. Except for nitrous oxide, medical gases may be stored in an unlocked area.

1. Large volume parenteral solutions that contain no active therapeutic drugs other than electrolytes;

2. Irrigation solutions;

3. Contrast media;

4. Medical gases;

5. Sterile sealed surgical trays that may include a Schedule VI drug; and

6. Blood, blood components and derivatives, and synthetic blood components and products.

18 VAC 110-20-490. Automated devices for dispensing and administration of drugs.

5. and

18 VAC 110-20-555. Use of automated dispensing devices.

9.

The PIC or his designee shall conduct at least a monthly audit to review distribution and administration of Schedule II through V drugs from each automated dispensing device as follows:

a. The audit shall reconcile records of all quantities of Schedule II-V drugs dispensed from the pharmacy with records of all quantities loaded into each device to detect whether any drugs recorded as removed from the pharmacy were diverted rather than being placed in the proper device.

b. A discrepancy report shall be generated for each discrepancy in the count of a drug on hand in the device. Each such report shall be resolved by the PIC or his designee within 72 hours of the time the discrepancy was discovered or, if determined to be a theft or an unusual loss of drugs, shall be immediately reported to the board in accordance with § 54.1-3404 (E) of the Drug Control Act.

c. The audit shall include a review of a sample of administration records from each device per month for possible diversion by fraudulent charting. A sample from each device shall not be less than 24 consecutive hours within the month being audited.

d. The audit shall include a check of medical records to ensure that a valid order exists for a random sample of doses recorded as administered.

e. The audit shall also check for compliance with written procedures for security and use of the automated dispensing devices, accuracy of distribution from the device, and proper record keeping.

f. The hard-copy distribution and administration records printed out and reviewed in the audit shall be initialed and dated by the person conducting the audit and maintained in the pharmacy for a period of two years. If non-pharmacist personnel conduct the audit, a pharmacist shall review the record and shall initial and date the record. These distribution records reviewed in conducting the audit may be maintained electronically provided they can be readily retrieved upon request, provided they are maintained in a "read-only' format which does not allow alteration of the records, and provided a log is maintained for a period of two years showing dates of audit and review, the identity of the automated dispensing device being audited, the time period covered by the audit and review, initials of all reviewers.

~~The pharmacist-in-charge or his designee shall conduct at least a monthly audit and review of all distribution and administration of Schedule II through V drugs from each automated dispensing device. The audit shall reconcile the quantities loaded into the device and still on hand with the quantities removed from the device for administration. This audit shall also check for compliance with written procedures for security and use of the automated dispensing devices, accuracy of distribution from the device, and proper record keeping. Random checks shall be made to ensure that a valid order exists for each dose administered. The hard-copy distribution records printed out and reviewed in the audit shall be initialed and dated by the person conducting the audit and maintained in the pharmacy for a period of two years. If non-pharmacist personnel conduct the audit, a pharmacist shall review the record and shall initial and date the record. These distribution records reviewed in conducting the audit may be maintained electronically provided they can be readily retrieved upon request, provided they are maintained in a "read-only' format which does not allow alteration of the records, and provided a log is maintained for a period of two years showing dates of audit and review, the identity of the automated dispensing device being audited, the time period covered by the audit and review, initials of all reviewers.~~

Department of Health Professions
2004 Session of the General Assembly

DHP-PHA-#2

A bill to amend and reenact §§ 2.2-4002 and 54.1-3314.1 of the *Code of Virginia* to authorize the Board of Pharmacy to designate up to two hours of continuing education in a specific subject area by publication of such requirement in a timely manner.

Be in enacted by the General Assembly:

1. That §§ 2.2-4002 and 54.1-3314.1 of the *Code of Virginia* are amended and reenacted as follows:

§ 2.2-4002. Exemptions from chapter generally.
A. Although required to comply with § 2.2-4103 of the Virginia Register Act (§ 2.2-4100 et seq.), the following agencies shall be exempted from the provisions of this chapter, except to the extent that they are specifically made subject to §§ 2.2-4024, 2.2-4030 and 2.2-4031:
1. The General Assembly.
2. Courts, any agency of the Supreme Court, and any agency that by the Constitution is expressly granted any of the powers of a court of record.
3. The Department of Game and Inland Fisheries in promulgating regulations regarding the management of wildlife and for all case decisions rendered pursuant to any provisions of Chapters 2 (§ 29.1-200 et seq.), 3 (§ 29.1-300 et seq.), 4 (§ 29.1-400 et seq.), 5 (§ 29.1-500 et seq.), and 7 (§ 29.1-700 et seq.) of Title 29.1.
4. The Virginia Housing Development Authority.
5. Municipal corporations, counties, and all local, regional or multijurisdictional authorities created under this Code, including those with federal authorities.
6. Educational institutions operated by the Commonwealth, provided that, with respect to § 2.2-4031, such educational institutions shall be exempt from the publication requirements only with respect to regulations that pertain to (i) their academic affairs; (ii) the selection, tenure, promotion and disciplining of faculty and employees; (iii) the selection of students; and (iv) rules of conduct and disciplining of students.
7. The Milk Commission in promulgating regulations regarding (i) producers' licenses and bases, (ii) classification and allocation of milk, computation of sales and shrinkage, and (iii) class prices for producers' milk, time and method of payment, butterfat testing and differential.
8. The Virginia Resources Authority.
9. Agencies expressly exempted by any other provision of this Code.
10. The Virginia Voluntary Formulary Board in formulating recommendations regarding amendments to the Formulary pursuant to § 32.1-81.
11. The Department of General Services in promulgating standards for the inspection of buildings for asbestos pursuant to § 2.2-1164.

12. The State Council of Higher Education for Virginia, in developing, issuing, and revising guidelines pursuant to § 23-9.6:2.

13. The Commissioner of Agriculture and Consumer Services in adopting regulations pursuant to subsection B of § 3.1-726.
14. The Commissioner of Agriculture and Consumer Services and the Board of Agriculture and Consumer Services in promulgating regulations pursuant to subsections B and C of § 3.1-106.4, subsection B of §§ 3.1-126.12:1, 3.1-271.1, 3.1-530.1, and 3.1-398, subsections B and C of § 3.1-828.4, and subsection A of § 3.1-884.21:1.
15. The Board of Optometry when specifying therapeutic pharmaceutical agents, treatment guidelines, and diseases and abnormal conditions of the human eye and its adnexa for TPA-certification of optometrists pursuant to Article 5 (§ 54.1-3222 et seq.) of Chapter 32 of Title 54.1.
16. [Repealed.]
17. The Virginia War Memorial Foundation.
18. The Virginia Medicaid Prior Authorization Advisory Committee in making recommendations to the Board of Medical Assistance Services regarding prior authorization for prescription drug coverage pursuant to Article 4 (§ 32.1-331.12 et seq.) of Chapter 10 of Title 32.1.
19. The State Board of Education, in developing, issuing, and revising guidelines pursuant to § 22.1-203.2.
20. The Virginia Racing Commission, (i) when acting by and through its duly appointed stewards or in matters related to any specific race meeting or (ii) in promulgating technical rules regulating actual live horse racing at race meetings licensed by the Commission.
21. The Virginia Small Business Financing Authority.
22. The Virginia Economic Development Partnership Authority.
23. The Board of Agriculture and Consumer Services in adopting, amending or repealing regulations pursuant to subsection A (ii) of § 59.1-156.
24. The Insurance Continuing Education Board pursuant to § 38.2-1867.
25. The Board of Health in promulgating the list of diseases that shall be reported to the Department of Health pursuant to § 32.1-35.
<u>26. The Board of Pharmacy when specifying special subject requirements for continuing education for pharmacists pursuant to Article 3 (§ 54.1-3314.1) of Chapter 33 of Title 54.1.</u>
B. Agency action relating to the following subjects shall be exempted from the provisions of this chapter:
1. Money or damage claims against the Commonwealth or agencies thereof.
2. The award or denial of state contracts, as well as decisions regarding compliance therewith.
3. The location, design, specifications or construction of public buildings or other facilities.
4. Grants of state or federal funds or property.
5. The chartering of corporations.
6. Customary military, naval or police functions.
7. The selection, tenure, dismissal, direction or control of any officer or employee of an agency of the Commonwealth.
8. The conduct of elections or eligibility to vote.
9. Inmates of prisons or other such facilities or parolees therefrom.
10. The custody of persons in, or sought to be placed in, mental, penal or other state institutions as well as the treatment, supervision, or discharge of such persons.
11. Traffic signs, markers or control devices.

12. Instructions for application or renewal of a license, certificate, or registration required by law.
13. Content of, or rules for the conduct of, any examination required by law.
14. The administration of pools authorized by Chapter 47 (§ 2.2-4700 et seq.) of this title.

15. Any rules for the conduct of specific lottery games, so long as such rules are not inconsistent with duly adopted regulations of the State Lottery Board, and provided that such regulations are published and posted.
16. Orders condemning or closing any shellfish, finfish, or crustacea growing area and the shellfish, finfish or crustacea located thereon pursuant to Article 2 (§ 28.2-803 et seq.) of Chapter 8 of Title 28.2.
17. Any operating procedures for review of child deaths developed by the State Child Fatality Review Team pursuant to § 32.1-283.1.
18. The regulations for the implementation of the Health Practitioners' Intervention Program and the activities of the Intervention Program Committee pursuant to Chapter 25.1 (§ 54.1-2515 et seq.) of Title 54.1.
19. The process of reviewing and ranking grant applications submitted to the Commonwealth Neurotrauma Initiative Advisory Board pursuant to Chapter 3.1 (§ 51.5-12.1 et seq.) of Title 51.5.
20. Loans from the Small Business Environmental Compliance Assistance Fund pursuant to Article 4 (§ 10.1-1197.1 et seq.) of Chapter 11.1 of Title 10.1.
21. The Virginia Breeders Fund created pursuant to § 59.1-372.
22. The types of pari-mutuel wagering pools available for live or simulcast horse racing.
23. The administration of medication or other substances foreign to the natural horse.
C. Minor changes to regulations published in the Virginia Administrative Code under the Virginia Register Act, Chapter 41 (§ 2.2-4100 et seq.) of this title, made by the Virginia Code Commission pursuant to § 30-150, shall be exempt from the provisions of this chapter.

§ 54.1-3314.1. Continuing education requirements; exemptions; extensions; procedures; out-of-state licensees; nonpractice licenses.

A. Each pharmacist shall have obtained a minimum of fifteen continuing education hours of pharmaceutical education through an approved continuing pharmaceutical education program during the year immediately preceding his license renewal date.
B. An approved continuing pharmaceutical education program shall be any program approved by the Board.
C. Pharmacists who have been initially licensed by the Board during the one year preceding the license renewal date shall not be required to comply with the requirement on the first license renewal date that would immediately follow.
D. The Board may grant an exemption from the continuing education requirement if the pharmacist presents evidence that failure to comply was due to circumstances beyond the control of the pharmacist.
E. Upon the written request of a pharmacist, the Board may grant an extension of one year in order for a pharmacist to fulfill the continuing education requirements for the period of time in question. Such extension shall not relieve the pharmacist of complying with the continuing education requirement for the current period.
F. The pharmacist shall attest to the fact that he has completed the continuing education requirements as specified by the Board.
G. The following shall apply to the requirements for continuing pharmaceutical education:

1. The provider of an approved continuing education program shall issue to each pharmacist who has successfully completed a program certification that the pharmacist has completed a specified number of hours.

2. The certificates so issued to the pharmacist shall be maintained by the pharmacist for a period of two years following the renewal of his license.
3. The pharmacist shall provide the Board, upon request, with certification of completion of continuing education programs in a manner to be determined by the Board.
H. Pharmacists who are also licensed in other states and who have obtained a minimum of fifteen hours of approved continuing education requirements of such other states need not obtain additional hours.
I. The Board shall provide for an inactive status for those pharmacists who do not wish to practice in Virginia. The Board shall require upon request for change from inactive to active status proof of continuing education hours equal to that which would have been required should the pharmacist have continued to hold an active license. No person shall practice in Virginia unless he holds a current active license.
J. As part of the 15-hour requirement, the board may require up to 2 hours of continuing education in a specific subject area as part of the annual requirement. If the board designates a required subject area of CE, the board shall publish such requirement no later than January 1 of the calendar year for which the specific CE is required.

ATTACHMENT 3

Department of Health Professions

2004 Session of the General Assembly

DHP-PHA-#1

A bill to amend and reenact § 54.1-3434.02 of the *Code of Virginia* to update terminology with respect to pharmacy technicians as a result of the requirement for registration of all pharmacy technicians effective February 2004.

Be in enacted by the General Assembly:

1. That § 54.1-3434.02 of the *Code of Virginia* are amended and reenacted as follows:

§ 54.1-3434.02. Automated drug dispensing systems.

A. Hospitals licensed pursuant to Title 32.1 or Title 37.1 may use automated drug dispensing systems, as defined in § 54.1-3401, upon meeting the following conditions:

1. Drugs are placed in the automated drug dispensing system in a hospital and are under the control of a pharmacy providing services to the hospital;

2. The pharmacist-in-charge of the pharmacy providing services to the hospital has established procedures for assuring the accurate stocking and proper storage of drugs in the automated drug dispensing system and for ensuring accountability for and security of all drugs utilized in the automated drug dispensing system until the time such drugs are removed from the automated drug dispensing system for administration to the patients;

3. Removal of drugs from any automated drug dispensing system for administration to patients can only be made pursuant to a valid prescription or lawful order of a prescriber;

4. Adequate security for automated drug dispensing systems is provided, as evidenced by written policies and procedures, for (i) preventing unauthorized access, (ii) complying with federal and state regulations on prescribing and dispensing controlled substances, (iii) maintaining patient confidentiality, and (iv) assuring compliance with the requirements of this section;

5. Accountability for drugs dispensed from automated drug dispensing systems is vested in the pharmacist-in-charge of a pharmacy located within the hospital or the pharmacist-in-charge of any outside pharmacy providing pharmacy services to the hospital;

6. Filling and stocking of all drugs in automated drug dispensing systems shall be performed under the direction of the pharmacist-in-charge. The task of filling and stocking of drugs into an automated drug dispensing system shall be performed by a pharmacist or ~~the designee of the pharmacist-in-charge~~ a pharmacy technician, who shall be an employee of the provider pharmacy and shall be properly trained

in accordance with established standards set forth in a policy and procedure manual maintained by the provider pharmacy. ~~Delegation of filling and stocking tasks to a nonpharmacist shall not be conditioned on the use of the automated drug dispensing system as a floor stock system or a patient specific drug dispensing system; however, the filling and stocking shall be performed by a person who holds current certification by the National Pharmacy Technician Certification Board as a pharmacy technician.~~ The pharmacist stocking and filling the automated drug dispensing system or, if ~~a nonpharmacist is~~

~~delegated this task~~ filled by a pharmacy technician, the pharmacist-in-charge shall be responsible for the proper and accurate stocking and filling of the automated drug dispensing system.

B. Drugs placed into and removed from automated drug dispensing systems for administration to patients shall be in the manufacturer's or distributor's sealed original packaging or in unit-dose containers packaged by the pharmacy.

C. The pharmacist-in-charge in a pharmacy located within a hospital or the pharmacist-in-charge of any outside pharmacy providing pharmacy services to a hospital shall be responsible for establishing procedures for (i) periodically inspecting and auditing automated drug dispensing systems to assure the proper storage, security, and accountability for all drugs placed in and removed from automated drug dispensing systems, and (ii) reviewing the operation and maintenance of automated drug dispensing systems. This monitoring shall be reviewed by a pharmacist while on the premises of the hospital and in accordance with the pharmacist-in-charge's procedures and the Board of Pharmacy's regulations.

D. The Board of Pharmacy shall promulgate regulations establishing minimum requirements for random periodic inspections and monthly audits of automated drug dispensing systems to assure the proper storage, security, and accountability of all drugs placed in and removed from automated drug dispensing systems and for reviewing the operation and maintenance of automated drug dispensing systems.